

**FORM** 

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REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES
CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK
Occasional a Discours

Quarterly	Report:	
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FOR OFFICE USE ON

riffat Report (Fund balance on Line E must be \$0)	
Amendment of the Report Indicated Above	

Full name and complete mailing address of Political Committee: CHECK FOR ADDRESS CHANGE State Board of Elections Sprinafield Office COMMITTEE ID #

Friends of Beth Derry 10703 N Dana Dr

Peoria IL 61615 25992 - 14 E-mail address: bethcriderderry@yahoo.com CHECK FOR E-MAIL ADDRESS CHANGE ALL POLITICAL COMMITTEES RETURN TO: REPORTING PERIOD CASH AVAILABLE AT BEGINNING OF REPORTING PERIOD: STATE BOARD OF ELECTIONS STATE BOARD OF FLECTIONS 7/1/2021 | 9/30/202 2329 S MacARTHUR BLVD 69 W WASHINGTON ST, STE LL-08 SPRINGFIELD, IL 62704-4503 CHICAGO, IL 60602-3026 **FROM THRU** Repeat this amount in SECTION D, Line (A) **SECTION A — RECEIPTS** SECTION B — EXPENDITURES 1. Individual Contributions 6. Transfers Out 50 \$0 a. Itemized (from Schedule A): a. Itemized (from Schedule B): (1a)(6a) \$0 \$0 b. Not-Itemized: (1b)b. Not-Itemized: (6b)2. Transfers In 7. Loans Made ş0 ģ0 a. Itemized (from Schedule A): a. Itemized (from Schedule B): (7a)ġ0 \$0 b. Not-Itemized: (2b) b. Not-Itemized: (7b)3. Loans Received 8. Expenditures  $_{\rm S}0$ <sub>5</sub>0 a. Itemized (from Schedule A): (3a) a. Itemized (from Schedule B): (8a) \$0 \$0 b. Not-Itemized (3b) b. Not-Itemized (8b) 4. Other Receipts 9. Independent Expenditures <sub>\$</sub>0 <u>\$</u>0 a. Itemized (from Schedule A): (4a)a. Itemized (from Schedule B-9): (9a) \$<sup>0</sup> śΟ b. Not-Itemized (4b) b. Not-Itemized (9b) TOTAL EXPENDITURES (6a thru 9b) \$0 **TOTAL RECEIPTS (1a thru 4b)** (TR) (TE) SECTION C — DEBTS AND OBLIGATIONS In-Kind Contributions (Include previously reported unpaid debts) \$0 a. Itemized (from Schedule I): (5a) **10.** a. Itemized (from Schedule C): (10a) b. Not-Itemized \$0 (5b) b. Not-Itemized **\$0** (10b)**\$**0 TOTAL IN-KIND (5a + 5b) **TOTAL DEBTS & OBLIGATIONS** SECTION D — CASH BALANCE Name and address of person submitting this report if other Cash available at beginning of than the committee's Chair or Treasurer: \$0 (A) reporting period: Total Receipts from Section A (TR):  $\$^{\overline{0}}$ Total cash (A) plus (B):  $\$ \overline{0}$ Total Expenditures from Section B (TE): \$0 Funds available at close of reporting period (C minus D): Investments total (if applicable): 50

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

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